POLICY AND COMMUNICATIONS BULLETIN
THE CLINICAL CENTER

Medical Administrative Series

M01-1 1 June 2001

MANUAL TRANSMITTAL SHEET

SUBJECT: Use of Patient's Own Dietary Supplements and Alternative Consumable Products Brought Into the Clinical Center

1. Explanation of Material Transmitted: This issuance transmits the policy of the Clinical Center on the use of dietary and herbal supplements and related products by patients while admitted to the CC. This policy was approved by the Medical Executive Committee on 15 May 2001.

2. Material Superseded: None

3. Filing Instructions: Pharmacy Section

   Remove: None

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Distribution:

Physicians, Dentists and Other Practitioners Participating in Patient Care

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INTRODUCTION

Clinical Center (CC) patients often bring dietary supplements and other alternative consumable products with them upon admission. Some of these products exhibit drug-like qualities and have been shown to impact on procedures and/or interact with therapeutic agents. To assure patient safety and the integrity of the scientific research programs, it is important that these products be reviewed and, prior to use, authorized by the primary physician or designee upon admission into the CC.

DEFINITIONS

Vitamins, minerals, amino acids, herbs or other botanicals (plant-derived substances) are currently considered to be "dietary supplements," yet the biological activity of herbs or botanicals are generally more drug-like in nature. "Alternative consumable products" is a broader category that includes concentrates, metabolites, constituents, extracts, or a combination of any ingredient described above that is ingested with the intent to maintain or improve health.

POLICY

Patients shall use their own dietary supplements and alternative consumable products only upon authorizing orders by their Clinical Center physician.

PROCEDURES

Through the established admission assessment process, within 8 hours of admission the nurse will screen all inpatients for current use of dietary supplements and alternative consumable products.

Products currently being used by a patient will be promptly reported to the physician in order to determine whether inpatient use is allowed. If inpatient use is allowed, the physician will generate MIS orders to authorize use of each product by name. If the physician does not specifically authorize usage, the patient will not be allowed to take the product.

Patients will be responsible for the initial and ongoing supply of these products during the course of the hospital stay.